

November 17, 2015

Submitted via email to: TribalAffairs@cms.hhs.gov

<u>Comments from the Alaska State Hospital and Nursing Home Association in support of the CMS 100 percent FMAP proposal</u>

The Alaska State Hospital and Nursing Home Association (ASHNHA) is pleased to provide the following comments in support of the Center for Medicare and Medicaid Services' (CMS) proposal to make additional services "received through" an Indian Health Service/Tribal facility eligible for reimbursement at 100 percent FMAP.

ASHNHA, first organized in 1953 as a 501(c)(6) not-for-profit company, is a member organization representing the combined interests of hospitals and nursing homes in Alaska. Our mission is to be a unified Association providing effective statewide leadership to address health care delivery challenges affecting all Alaskans. Our vision is to be the premier provider advocate bringing unity to the health care community in addressing health care issues and to support our members' goal to improve Alaskan's health.

ASHNHA is a successful composition of private, for-profit, not-for-profit, and federal, state, and tribal hospitals and nursing homes either owned or managed by larger healthcare systems, Alaska Native corporations, or local municipalities. The Association represents a complex mix of healthcare interests. ASHNHA seeks to identify a balanced viewpoint on important health care policy issues in Alaska.

We would like to thank CMS and the Office of Tribal Affairs for the opportunity to review and submit comments on CMS' proposal before it is finalized. We do not intend to speak for the Alaska tribal health system or any of the individual tribal hospitals that are part of the Association. As an Association we would like to offer our support for CMS' effort to improve the health status of American Indian and Alaska Native Medicaid beneficiaries in Alaska.

Overall, we support CMS' proposal to modify its interpretation of the 100 percent FMAP rule. We support efforts to allow the Alaska Tribal Health System to work with the State to improve the health status of AI/AN Medicaid beneficiaries and to make additional Medicaid services available to the patients they serve through modifications in the FMAP rule.

In particular, we would highlight our support for CMS' proposal to include "transportation services, as well as emergency transportation services and non-emergency transportation including related travel expenses (such as meals, lodging, and cost of an attendant pursuant to federal and state requirements)" as specific examples of services that would be eligible for 100 percent FMAP. Travel and related accommodation services are an essential part of health care delivery in Alaska for rural Medicaid beneficiaries.



As CMS finalizes the interpretation we recognize there are specific aspects of the proposal that will need to be clarified. We would request CMS be responsive to the needs of the Alaska tribal health system. As the details of the proposal are clarified, it will be important to retain and highlight language that allows States to retain flexibility to work with providers and to keep the processes as simple as possible.

Thank you for the opportunity to offer our support for the concepts in CMS' proposal to reinterpret the 100 percent FMAP.

Sincerely,

Becky Hultberg President/CEO